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## DECLARATION (37 CFR 1.63) FOR UTILITY OR DESIGN APPLICATION USING AN APPLICATION DATA SHEET (37 CFR 1.76)

As the below named inventor(s), I/we declare that:								
This declaration is directed to:								
Application No, filed on,								
as amended on (if applicable);								
I/we believe that I/we am/are the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought;								
I/ we have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment specifically referred to above;								
I/we acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me/us to be material to patentability as defined in 37 CFR 1.56, including material information which became available between the filing date of the prior application and the National or PCT International filing date of the continuation-in-part application, if applicable; and								
All statements made herein of my/own knowledge are true, all statements made herein on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and may jeopardize the validity of the application or any patent issuing thereon.								
FULL NAME OF INVENTOR(S)								
Inventor one: Jon L. Howell								
Signature: On Horuces Citizen of: U.S.A.								
Inventor two: Erik W. Perez								
Signature: Eilen of: U.S.A.								
Inventor three: Alfred Waterfeld								
Signature: A. Maturfeld Citizen of: GERMANY								
Inventor four: ChadronyMark Friesen								
Signature: Citizen of: U.S.A.								
Additional inventors are being named on 1 additional form(s) attached bereto								

Burden Hour Statement: This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is used by the public to file (and the PTO to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.14. This form is estimated to take 1 minute to complete. This time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chlef Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Page 2
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As the below named inventor(s), I/we declare that:

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Application No, filed on,							
as amended on (if applicable);							
I/we believe that I/we am/are the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought;							
I/ we have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment specifically referred to above;							
I/we acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me/us to be material to patentability as defined in 37 CFR 1.56, including material information which became available between the filing date of the prior application and the National or PCT International filing date of the continuation-in-part application, if applicable; and							
All statements made herein of my/own knowledge are true, all statements made herein on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and may jeopardize the validity of the application or any patent issuing thereon.							
FULL NAME OF INVENTOR(S)							
Inventor one:Joseph Stuart Thrasher							
Signature: Jack S Chraule Citizen of: U.S.A.							
Inventor two:							
Signature: Citizen of:							
Inventor three:							
Signature: Citizen of:							
Inventor four:							
Signature: Citizen of:							

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AUTHORIZA	TION	OF	ΔG	FNT

Application Number		`
Filing Date		
First Named Inventor	Jon L. Howell et al	
Title	Thermally Stable Perfluoropolyethers and Processes Therefor and Therewith	_
Group Art Unit		_
Examiner Name		
Attorney Docket Number	CH2782 US NA	_

	I hereby appoint:  ☑ Practitioners at Customer Number							
	ners at Cus	tomer Number	23906			BATENT TRACES		
OR						PATENT TRADE	IARK OFFICE	
☐ Practition	ner(s) name					<del></del>	_	
		Name		$\dashv$	Registration N		_	
	<u> </u>	Lucas K. S		$\perp$	34,724			
ļ		Nancy S. M			29,120	) <u> </u>	_	
		Kathryn M. Sa	anchez		43,081	l 	_	
	L					"	_	
as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.								
Please change the correspondence address for the above-identified application to:  ☑ The above-mentioned Customer Number  OR  ☐ Practioners at Customer Number  OR								
Firm <i>or</i> Individu	☐ Firm <i>or</i> Individual Name							
Address								
Address								
City				State		ZIP		
Country						<u> </u>		
Telephone				Fax				
I am the:  Applicant/Inventor.  Assignee of record of the entire interest. See 37 CFR 3.71.  Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).								
SIGNATURE of Applicant or Assignee of Record								
Name (Jon't, Howell )								
Signature House								
Date								
NOTE: Signa Submit multi	atures of a iple forms i	ill the inventors or a if more than one sig	assignees of recor	rd of the d, see be	entire interest or the	eir representativ	e(s) are required.	
Total of	*Total of 5 forms are submitted.							

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POWER	OF A	ATTO	RNE	EY (	DR
AUTHOR	ΙΖΔΤ	ION	OF A	\GF	NT

Application Number		•
Filing Date		
First Named Inventor	Jon L. Howell et al	_
Title	Thermally Stable Perfluoropolyethers and Processes Therefor and Therewith	
Group Art Unit		
Examiner Name		
AMarian Dantas Maria	CH2782 LIS NA	_

Practitioners at Customer Number  OR  Practitioner(s) named below:  Name Registration Number Lucas K. Shay 34,724 Nancy S. Mayer 29,120 Kathryn M. Sanchez 43,081  as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.  Please change the correspondence address for the above-identified application to:  The above-mentioned Customer Number  OR Practioners at Customer Number  OR Sity State ZIP  Country	OR    Practitioner(s) named below:    Name			•			·		
Practitioner(s) named below:    Name	Practitioner(s) named below:    Name		3.5 (%)						
Name Registration Number  Lucas K. Shay 34,724  Nancy S. Mayer 29,120  Kathryn M. Sanchez 43,081  as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.  Please change the correspondence address for the above-identified application to:  The above-mentioned Customer Number  Registration Number 43,081  Brian or Correspondence address for the above-identified application to:  The above-mentioned Customer Number  Registration Number 43,081  Please Carle Device Correspondence address for the above-identified application to:  The above-mentioned Customer Number  Registration Number 43,081  Please Carle Device Correspondence address for the above-identified application to:  The above-mentioned Customer Number  Registration Number 5,120  Please Carle Device Correspondence address in the United States Please Code Label Here  Place Bar Code Label Here  Stity State ZIP  Country  Felephone Fax  I am the:  Applicant/Inventor.  Assignee of record of the entire interest. See 37 CFR 3.71.  Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  SIGNATURE of Applicant or Assignee of Record	Name Registration Number  Lucas K. Shay 34,724  Nancy S. Mayer 29,120  Kathryn M. Sanchez 43,081  as my/our attomey(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.  Please change the correspondence address for the above-identified application to:  The above-mentioned Customer Number OR Practioners at Customer Number Place Bar Code Label Here  Registration Number States Patent and Trademark Office connected therewith.  Please change the correspondence address for the above-identified application to:  The above-mentioned Customer Number Place Bar Code Label Here  Registration Number at 30 transact all business in the United States Trade and to transact all business in the United States Trade above, and to transact all business	OR						PATENT TRADEMA	RK OFFICE
Lucas K. Shay  Nancy S. Mayer  29,120  Kathryn M. Sanchez  43,081  as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.  Please change the correspondence address for the above-identified application to:  The above-mentioned Customer Number  Reactioners at	Lucas K. Shay  Nancy S. Mayer  29,120  Kathryn M. Sanchez  43,081  as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.  Please change the correspondence address for the above-identified application to:  The above-mentioned Customer Number  OR  Practioners at Customer Number  OR  Firm or Individual Name  Address  City  State  I am the:  Applicant/Inventor.  Assignee of record of the entire interest. See 37 CFR 3.71.  Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  SIGNATURE of Applicant or Assignee of Record  Name  Erik W. Perez  Signature  Date  U-25 O  NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	Practitioner(s) named below:							
Nancy S. Mayer 29,120  Kathryn M. Sanchez 43,081  as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.  Please change the correspondence address for the above-identified application to:  The above-mentioned Customer Number  OR  Practioners at Customer Number  OR  Firm or Individual Name  Address  City  State  I am the:  Applicant/Inventor.  Assignee of record of the entire interest. See 37 CFR 3.71.  Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  SIGNATURE of Applicant or Assignee of Record	Nancy S. Mayer 29,120  Kathryn M. Sanchez 43,081  as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.  Please change the correspondence address for the above-identified application to:  The above-mentioned Customer Number  OR  Practioners at Customer Number  OR  Firm or Individual Name  Address  City  State  I am the:  Applicant/Inventor.  Assignee of record of the entire interest. See 37 CFR 3.71.  Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  SIGNATURE of Applicant or Assignee of Record  Name  Erik W. Perez  Signature  Date  United States 29,120  43,081  443,081  43,081  443,081  43,081  44,081  Fixed Bark Code Label Here  Place Bar Cod			Name			Registration N	lumber	
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The above-mentioned Customer Number  OR    Practioners at Customer Number  OR    Firm or Individual Name   Place Bar Code Label Here  Address  City   State   ZIP   Country  Felephone   Fax   I am the:	The above-mentioned Customer Number  OR  Practioners at Customer Number  OR  Firm or Individual Name  Address  City  State  ZIP  Country  Telephone  I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  SIGNATURE of Applicant or Assignee of Record  Name  Erik W. Perez  Signature  Date  NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.							transact all busine	ess in the
Practioners at Customer Number  OR    Firm or Individual Name   Firm o	Place Bar Code Label Here  Place Bar Code Label	Please chan	ge the cor	respondence addre	ss for the above-ide	ntified a	pplication to:		
Practioners at Customer Number  OR  Firm or Individual Name  Address  City  State  ZIP  Country  Felephone  I am the:  Applicant/Inventor.  Assignee of record of the entire interest. See 37 CFR 3.71.  Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  SIGNATURE of Applicant or Assignee of Record  Name  Erik W. Perez	Place Bar Code Label Here  OR    Firm or Individual Name   Firm or Ind	The above	ve-mentior	ned Customer Numb	per				
Practioners at Customer Number	Firm or   Individual Name   Address   City   State   ZIP							Stars San Carta t	
Firm or Individual Name Address Address City State ZIP Country Felephone Fax  I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  SIGNATURE of Applicant or Assignee of Record Name Erik W. Perez	Firm or Individual Name								
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Address  City State ZIP  Country  Felephone Fax  I am the:  Applicant/Inventor.  Assignee of record of the entire interest. See 37 CFR 3.71.  Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  SIGNATURE of Applicant or Assignee of Record  Name Erik W. Perez	Address  City State ZIP  Country  Telephone Fax  I am the:  Applicant/Inventor.  Assignee of record of the entire interest. See 37 CFR 3.71.  Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  SIGNATURE of Applicant or Assignee of Record  Name Erik W. Perez  Signature  Date 6.23.0  NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.		al Name						
City State ZIP  Country  Felephone Fax  I am the:  Applicant/Inventor.  Assignee of record of the entire interest. See 37 CFR 3.71.  Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  SIGNATURE of Applicant or Assignee of Record  Name Erik W. Perez	Country  Telephone Fax  I am the:  Applicant/Inventor.  Assignee of record of the entire interest. See 37 CFR 3.71.  Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  SIGNATURE of Applicant or Assignee of Record  Name Erik W. Perez  Signature  Date 6-230  NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	Address				-			
Country  Felephone Fax  I am the:  Applicant/Inventor.  Assignee of record of the entire interest. See 37 CFR 3.71.  Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  SIGNATURE of Applicant or Assignee of Record  Name Erik W. Perez	Telephone   Fax    I am the:	Address	Address						
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Name Erik W. Perez	Name Erik W. Perez  Signature  Date  6-220  NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.								
	Signature  Date  0.220  NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.	SIGNATURE of Applicant or Assignee of Record							
Signature Exillative	Date 6.210  NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.	Name	Erik W.	Perez					
TANKO IV-	NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.	Signature & Landing							
Date 6.2301 O	Submit multiple forms if more than one signature is required, see below*.								
								eir representative	e(s) are required.
Tatal of E forms are submitted	X *Total of 5 forms are submitted.	Total of 5	forms are	submitted.					

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## **POWER OF ATTORNEY OR AUTHORIZATION OF AGENT**

Application Number	
Filing Date	
First Named Inventor	Jon L. Howell et al
Title	Thermally Stable Perfluoropolyethers and Processes Therefor and Therewith
Group Art Unit	
Examiner Name	
Attornov Docket Number	CH2782 US NA

•												
	I hereby appoint:  ☑ Practitioners at Customer Number  23906  PATENT TRADEMARK OFFICE											
OR						PATENT TRADEMA	RK OFFICE					
☐ Practition	☐ Practitioner(s) named below:											
		Name	,		Registration N	lumber						
		Lucas K. S	hay		34,724	ŀ						
		Nancy S. M	ayer ' '		29,120	)						
	Kathryn M. Sanchez 43,081											
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SIGNATURE of Applicant or Assignee of Record												
Name Alfred Waterfeld												
Signature A. Waterfeld												
Date 07/06/0/												
	NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.											
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Jon L. Howell et al

PTO/SB/81 (02-01)

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Name	Chadron N	Mark Friesen							
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Name	lame Joseph Stuart Thrasher								
Signature	Signature Signature								
Date July 6, 2001									
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